In accordance with Section 9 of the Limited Liability Partnerships Act 2000

LL AP01

Appointment of member of a Limited Liability Partnership (LLP)



What this form is for
You may use this form
to appoint an individual as a
member of an LLP

What this form is NOT for You cannot use the form to appoint a corporate member To do this, please use form LL APO2 'Appointment of a corporate member of a Limited Liability Partnership (LLP)'



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COMPANIES HOUSE

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	Partnership (LLP)'	
1	LLP details	
LLP number	O C 3 8 5 1 4 2	→ Filling in this form Please complete in typescript or in
LLP name in full	52 ALDERLEY ROAD LLP	bold black capitals
		All fields are mandatory unless specified or indicated by *
Ž	Date of member's appointment	
Date of appointment	12 9 05 12/0114	
3	New member's details	
Title *	MR	Please provide any previous names which have been used for business purposes in the past 20 years Married women do not need to give former names unless previously used
Full forename(s)	SIMON KINGSLEY WICKHAM	
Surname	LLOYD	
Former name(s) •		for business purposes. Continue in Section 6 if required
Country/State of residence •	OCountry/State of residence This is in respect of your usual	
Date of birth	d 0 d 9 m 0 m 1 y 1 y 9 y 7 y 2	residential address as stated in Section 4a
Appointment type 9	Are you being appointed as a designated member?	Appointment type
		Your designation must match the status of the LLP
4	New member's service address o	
	Please complete the service address below You must also complete the member's usual residential address in Section 4a	O Service address This is the address that will appear on the public record. This does not
Building name/numbe	THE LLP'S REGISTERED OFFICE	have to be your usual residential address
Street		Please state 'The LLP's Registered
		Office' if your service address is recorded in the LLP's register of
Post town		members as the LLP's registered
County/Region		If you provide your residential address here it will appear on the
Postcode		
Country		•

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	LL APO1 Appointment of member of a Limited Liability Partnership (LLP)	
	Signatures	
	I consent to act as member of the above named LLP.	
nember's ure	X Suin (X)	
rising signature	Signature X	
	This form may be signed and authorised by: Designated member, Judicial factor	
	Additional former names (continued from Section 3)	
er names O		Additional former names Use this space to enter any additional names.
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Presenter information	Important information
You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form The contact information you give will be visible to searchers of the public record	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses
Contact name	™ Where to send
Company name Address 0.40	You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below
242	For LLPs registered in
Marylebone Road Post town	England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ
London County/Region	DX 33050 Cardiff
Postcode N W 1 6 J L Country	For LLPs registered in Scotland The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF
DX	DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post)
Telephone	
✓ Checklist	For LLPs registered in Northern Ireland
We may return forms completed incorrectly or with information missing	The Registrar of Companies, Companies House, Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG DX 481 N R Belfast 1
Please make sure you have remembered the following ☐ The LLP name and number match the information held on the public Register ☐ You have provided a correct date of birth ☐ You have completed the date of appointment ☐ You have completed the appointment type ☐ You have indicated if you are a designated member	Section 243 exemption If you are applying for, or have been granted, a section 243 exemption, please post this whole form to the different postal address below The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE
☐ You have provided both the service address and the usual residential address	i Further information
☐ Addresses must be a physical location They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number ☐ You have included all former names used for	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk
business purposes over the last 20 years You have enclosed a relevant Section 243	This form is available in an
application if applying for this at the same time as	alternative format. Please visit the
completing this form The new member has signed the form	forms page on the website at
☐ An authorising signature has been given by a designated member	www.companieshouse.gov.uk